

MEETING MINUTES

Project Name: IPRS	Doc. Version No: 1.0	Status: Draft
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Meeting Name: IPRS Core Team Meeting
Facilitator: Eric Johnson, DMH
Scribe: Tim Gwyn
Date: 04/09/2008
Time: 10:30 – 11:30 AM
Location: Wycliff – Conference Room 430

IPRS Core Team Attendees:

Gary Imes	Others:
Thelma Hayter	X Cathy Bennett
X Eric Johnson	X Sandy Flores
Travis Nobles	X Paul Carr
Cheryl McQueen	Theresa Diana
Joyce Sims	Chris Ferrell
X Jamie Herubin	X Rick Kretschmer
X Mike Frost	Deborah LeBlanc
X Myran Harris	Tim Sullivan
X Mario Vescio	X Tim Gwyn
X Wanda Mitchell	Jay Dixon

Attendees:

X Alamance-Caswell	X Johnston
X Albemarle	X Mecklenburg
X Catawba	X Onslow-Carteret
X Centerpoint	X OPC
X Crossroads	X Pathways
X Cumberland	X Sandhills
X Durham	X SE Center
X Eastpointe	X SE Regional
X ECBH	X Smoky Mountain
X Five – County MHA	X The Beacon Center
X Foothills	X Wake
Guilford	X Western Highlands
	X Piedmontt

Attendees:

Item No. Topics

1. Roll call
2. Please mute phones or refrain from excess activity to help with communications. Please state your name and which "area program" you are from when you speak. **Please do not place IPRS Core Team call on hold because of potential distraction to call discussion.**
3. Upcoming Check-writes (cut-off dates) – April 10, 17
4. Agenda items
 - FARO Presentation
 - **Zero (\$0) Paid Claims Solution**
 - Beta Test (NPI) Requirements Review
 - 100 records/LME/submission; Format test; full cycle run, 835
 - **Update scheduled termination: TBD**
 - IPRS Questions or Concerns
 - MMIS Updates – Theresa Diana
5. DMH and/or EDS concluding remarks
 - For **North Carolina Medicaid** claim questions / inquires please call EDS Provider Services at 1-800-688-6696 or 1-919-851-8888 and enter the appropriate extension listed below or 0 for the operator.
 - Physician phone analyst (i.e. Independent Mental Health Providers)-1
 - Hospital phone analyst (i.e. Enhanced Service Providers / LMEs) - 2
 - Roll Call Updates

Next Meeting: April 16 , 2008

For assistance with IPRS claims, adjustments, R2Web, accessing application, etc.
 Call the IPRS Help Desk – 1-800-688-6696, option 4 or 919-816-4355
 M-F, 8 a.m.-4:30 p.m., excluding holidays.
 IPRS Question and Answer email address – iprs.ganda@ncmail.net

ADMINISTRATION NOTES (10:30 a.m. AREA PROGRAMS CONFERENCE CALL)	
Item No.	Topics
1.	<p><u>Checkwrites</u></p> <p>(Eric Johnson)- There was a checkwrite on April 3rd. Next checkwrite cutoff dates are April 10, 17</p> <p>There were no questions regarding the April 3rd checkwrite.</p>
2.	<p><u>Agenda Items</u></p> <p>(Eric Johnson) – FARO: Cheryl McQueen will be giving a presentation. Topics will be Single Stream Funding, Tracking of County Funds, Crisis Funding Limitations and a NPI review. Please forward questions to IPRSQA if there is specific information from these areas that you would like for her to review during the presentation.</p> <p>Zero (\$0) Paid Claims Solution: Implemented solution during the April 3rd checkwrite for the Single Stream LMEs.</p> <p>EOB 8505 has been replaced with 8586 (Single Stream Funding Claim) for Single Stream claims. Report IPDR3833 was created to document the Single Stream LMEs' \$0 paid claim activity from each cycle. The report shows the amount that would have paid if the claims were not Single Stream. EOB 8586 will also replace EOB 8505 and 8508 on the IPDR2000. For the Single Stream claims that were previously denied with 8505 or 8508 from 07/01/07 – 03/27/08, the plan is to reprocess them by the end of April. Half during the April 10th checkwrite and the remaining during the April 17th checkwrite. Notification will be sent to LMEs.</p> <p>Crossroads is also Single Stream. Became Single Stream January 1st. They will be added to the list of Single Streams LMEs and their Single Stream claims will be included in the reprocessing.</p> <p>Some of the LMEs reported not being able to identify Single Stream claims on their 835s. For the 835, these claims will have Claims Adjustment Reason Code "A7."</p> <p>It was also pointed out that the 835 is showing Claims Adjustment Reason Code "42" for some Single Stream Claims. Claims Adjustment Reason Code "42" shows the cutback of the billed amount to the allowed amount. The A7 shows what would have paid if the claim was not single stream. Some LMEs reported not seeing the A7, but 42 on their 835 and total dollar amounts are not matching between the totals of EOB 8586 on the IPDR2000 and IPDR3833. EDS will research and get back to the LMEs. If there is an issue, then we may need to hold off reprocessing the claims until the issue is resolved.</p> <p>Some Single Stream LMEs reported that the IPDR3833 did not seem to have all of their claim activity reported. EDS will research and get back to the LMEs on this.</p>
3.	<p><u>Beta Test (NPI)</u></p> <p>(Eric Johnson) -- LMEs are encouraged to perform NPI cycle testing. NPI production implementation date is in six weeks, May 23rd.</p>

4.	<p><u>IPRS Related Questions</u></p> <p>Eastpointe: Submitted a couple weeks ago a request for changes in some rates. Will there be an update this week?</p> <p>Wanda Mitchell: An update was done on April 4th.</p> <p>Eastpointe: The last update is still showing 3/14.</p> <p>Wanda Mitchell: Will look into it.</p> <p>LMEs requested to be notified of updates or if there are any problems in processing their rate requests.</p> <p>Wanda Mitchell: The updates should take place every Friday. But will try and get an email out to everyone if there are problems.</p> <p>Durham: CPT rates and provider specialty 026. Not appearing on IPPR2417.</p> <p>EDS: The physician specialties roll up to the 001 specialty.</p> <p>Durham: So the 026 is part of the 001.</p> <p>EDS: Yes</p> <p>CPT 90862 and 90805 are different from what is on DMA website and what is in the system. Theresa is still working with DMA to find out which one is correct.</p> <p>Durham: 90872 appear to have been changed as well, but not showing up in IPRS.</p> <p>Eric Johnson: Will research and get back.</p> <p><u>DMA Questions:</u></p> <p>Mecklenburg: Are the CPT codes updated on the DMA website?</p> <p>EDS Medicaid: Yes. There should have been an update performed about 2 weeks ago.</p> <p>Mecklenburg: Under what heading would you find the update?</p> <p>EDS Medicaid: You should be able to look under the provider's specialty and go into that section of the site.</p> <p>Mecklenburg: Doesn't appear that any updates have been made. Is there another location we should be looking at?</p> <p>EDS Medicaid: Will look into it.</p> <p><u>MMIS Update</u></p> <p>(Eric Johnson)- Any Medicaid related questions?</p> <p>Western Highlands: Any updates on how a provider can receive authorization for Retro-Medicaid consumers that are beyond 90 days.</p> <p>EDS Medicaid: As of today, 90 days is the limitation. It is being researched.</p> <p>Western Highlands: Is the current 90 day rule based on the receipt of the OTR also being looked at? The current rule really doesn't cover the 90 days of eligibility.</p> <p>EDS Medicaid: This is being researched as well.</p> <p>Western Highlands: Are they also considering previously submitted authorizations for consumers that are beyond the 90 days? Will Value Options or DMA reconsider these requests or will the provider have to resubmit?</p> <p>EDS Medicaid: This is being researched as well.</p> <p>Western Highlands: Will the state consider not recouping? As it stands today the providers are eating the cost and have no recourse.</p>
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	<p>Wanda Mitchell: This would be a policy issue and would need to be looked into.</p> <p>Beacon Center: In the middle of converting their systems. When going through their reports and terminating people they have no dealings with, are any problems going to be created because the provider is being direct enrolled, but has not submitted anything notifying the LME?</p> <p>EDS: Will the Direct Enrolled Providers bill directly to Medicaid?</p> <p>Beacon Center: Yes. But are they still required to turn in information to the LME to update CDW and some are not?</p> <p>Eric Johnson: Was the response from Deborah Merrill received?</p> <p>Beacon Center: Yes. But still have some questions as to whether at some point the systems could be combined.</p> <p>Eric Johnson: It would be expected that as many things as possible would be considered, but not sure where things are at this time.</p> <p>Eastpointe: When getting Retro-Medicaid back on the IPDR2000 and an adjustment is done; since we need to have time to notify the providers of this, when does the 90 days start? Is it the DOS of the day of the recoupment?</p> <p>EDS Medicaid: Please send question to IPRSQA.</p> <p>Western Highlands: Spoke to the supervisor at Value Options on their Medicaid authorization request and what I understand they are operating under is that they will allow Retroactive Authorizations for 90 a day period starting from the day they receive the OTR.</p> <p>Eastpointe: How much is paid for a Medicaid client for room and board? Is there a percentage paid or is SSI supposed to pay all the room and board?</p> <p>Eric Johnson: Send to IPRSQA. Medicaid will research.</p>
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